

# CITY OF MIAMI BEACH

CITY HALL 1700 CONVENTION CENTER DRIVE MIAMI BEACH, FLORIDA 33139

www.ci.miami-beach.fl.us



Building Department

Telephone (305) 673-7610  
Facsimile (305) 673-7857

## STOP WORK ORDER / NOTICE OF VIOLATION

**Violator:**

**J QUINTERO ROOFING CORP/ CHAVEZ R.**  
12386 SW 130 ST  
MIAMI, FL  
33186-

**Owner:**

**CRESCENT HEIGHTS X INC**  
5225 COLLINS AVE  
MIAMI BEACH FL  
33140-

**Case Information:**

**Case No:** BV04001199

**Date Inspected:** 09/28/2004

**Sub-Type:** STRUCT

**Fees (if applicable):** \$0.00

**Property Address:** 5445 COLLINS AV

**Proximity/Unit:**

**Permit#:** B0003100

**Days to Comply:** 30

You must take the necessary action(s) to correct or eliminate the violation(s) and **contact the Inspector listed below.** If you do not comply within **30 day(s)** from receipt of this notice, the City of Miami Beach Building Department will file charges and present this case before the governing agency having jurisdiction. If you intend to pull a permit in response to this violation, a copy of the violation notice must be supplied to the Building Department. Any fines or fees incurred from this violation that remain outstanding will result in a lien being placed on the property.

**MIGUEL ANDERSON**  
**BUILDING INSPECTOR**  
**305-673-7610**

**Received By:**

**Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

### VIOLATION(S)

**Unit:** GENRL

**PERMIT HAS EXPIRED WITHOUT OBTAINING THE REQUIRED MANDATORY INSPECTIONS.**

**CITY OF MIAMI BEACH  
BUILDING DEPARTMENT**

**1700 Convention Center Drive  
Miami Beach, Florida 33139  
(305) 673-7610 Fax (305) 673-7857**

**NOTICE OF VIOLATION**

Case Number: BV04001199

09-27-2004

J QUINTERO ROOFING CORP  
12386 SW 130 ST  
MIAMI, FL  
33186

On 09/28/2004 an inspection performed at the property located at:

Property Address: **5445 COLLINS AV MBCH**  
Proximity/Unit:  
Permit# (if applicable): **B0003100**

revealed that you are in violation of the following sections:

**1: PERMIT HAS EXPIRED WITHOUT OBTAINING THE REQUIRED MANDATORY INSPECTIONS.**

**DESCRIPTION OF VIOLATION**

**Permit B0003100 expired on 11/20/2000**

You must take the necessary action(s) to correct or eliminate the violation(s) and contact Philip Azan at ext 6874. If you do not comply within 30 days from receipt of this notice, the City of Miami Beach Building Department will file charges and present this case before the governing agency having jurisdiction. Any fines or fees incurred from this violation that remain outstanding will result in a lien being placed on the property.

M. Anderson  
Miguel Anderson  
Building Inspector  
Phone: 305-673-7000 X6348

Received by  
Miguel Anderson  
9-28-04

**CITY OF MIAMI BEACH**  
**Building Department**  
**1700 Convention Ctr Drive, 2nd Floor**  
**Miami Beach, Florida 33139**

**Office: (305) 673-7610**

# Building Work Permit

**02-16-2005**

**Activity Number: B0003100**

**Status:** EXPIRED

Issued By: BUILRODR

Site Address: 5445 COLLINS AV MBCH  
Parcel #: 32140010270

Applied: 05/17/2000

Approved: 05/24/2000

Completed:

To Expire: 11/20/2000

Valuation: \$10,000.00

Applicant: J QUINTERO ROOFING CORP  
12386 SW 130 ST  
MIAMI FL 33186  
305-265-9226

Property Owner: CRESCENT HEIGHTS X INC  
5225 COLLINS AVE  
MIAMI BEACH FL 33140

Description: ROOF REPAIR /DRAINS & PARAPET FLASHINGS)800 SQS FT

Inspector Area: C

Class Code: REMFC

## DETAIL LIST

### Alteration/Repair Fees

Alteration Building/Structures - Per Costs:	\$0.00	\$0.00
Awning, Canopy, Patio Cover - Per Costs:	\$0.00	\$0.00
Area Under Roof - RADON - Per Sq.Ft.:	0	\$0.00
Walk-Thru - Per Valuation:	\$10,000.00	\$15.00
Repairs to Building/Structure - Per Costs:	\$0.00	\$0.00
Roofing or Re-roofing - Per Sq.Ft.:	800	\$65.00
Window/Doors - Per # of:	0	\$0.00
Signs 36-4 (Writer/Erect) - Per Sq.Ft.:	0	\$0.00
Fence and/or Wall - Per Linear Feet:	0	\$0.00
Partial Demo (Struct, Sign, Wall) - Per Costs:	\$0.00	\$0.00
Swimming Pool - Per Gallon:	0	\$0.00
Painting - Per Costs:	\$0.00	\$0.00
Sandblasting - Per Costs:	\$0.00	\$0.00
Paving - Per Sq.Ft.:	0	\$0.00
Concrete Slab - No Paving - Per Sq.Ft.:	0	\$0.00
Trees - Per # of:	0	
Hedges - Per Linear Feet:	0	
Groundcover - Per Sq.Ft.:	0	
Landscaping Fee:		\$0.00
Other Fees:		\$0.00
Penalty Fee (If Applicable):		\$0.00

**Activity Number: B0003100****Fire Safety Fees**

New Building or Addition - Per Sq.Ft.:	0	\$0.00
Storage/Industrial Bldg - E & F Occup - Per Sq.Ft.:	0	\$0.00
Greenhouse/Argiculture on Premises - Per Sq.Ft.:	0	\$0.00
Screen Enclsoure/Trail on Premises - Per Sq.Ft.:	0	\$0.00
SS Underground Tanks/App Shelter - Per #:	0	\$0.00
Construction not shown Above - Per Costs:	\$0.00	\$0.00
Alt/Repair Building/Structure - Per Costs:	\$0.00	\$0.00

**Marine Structure Fee**

Dock Area - Per Sq.Ft.:	0	\$0.00
Seawall - Per Linear Feet:	0	\$0.00
Boat Lifts, Davits, Hoist - Per # of:	0	\$0.00
Batter, Mooring, Dock Piles - Per # of:	0	\$0.00
Marine Structure Alt/Repair - Per Costs:	\$0.00	\$0.00

**SFBC Compliance Surcharge**

New Const/Add - Res/Mult-Fam/Comm - Per Sq.Ft.:	0	\$0.00
New Const/Add - Strg/Ind/Msc - Per Sq.Ft.:	0	\$0.00
Cost for Other Construction:		\$10,000.00

**Training Fee**

Training Fee:		\$8.00
Sanitation Fee:		\$30.00

**Additional Fees**

1st Reinspection:		\$0.00
Continued Reinspections - Per # of:	0	\$0.00
Building Joint Inspections - Per # of:	0	\$0.00
Change of Contractor Per # of:	0	\$0.00
Permit Extension - Per # of:	0	\$0.00

Residential Card:

Commercial Card:

Permit Card Replacements: \$0.00

Lost Plan Fee - SF: \$0.00

Lost Plan Fee - Other: \$0.00

Overtime Inspection Fees: \$0.00

Total of All Fees: \$124.00

Total of Payments: \$124.00

Balance Due: \$0.00

**CITY OF MIAMI BEACH**

**Building Work Permit**

**02-16-2005**

**Activity Number: B0003100**

Site Address: 5445 COLLINS AV MBCH

=====

**INSPECTION LIST**

Item: 01105 1105 - Foundation  
Item: 01110 1110 - Grade Beam  
Item: 01115 1115 - Floor Slab  
Item: 01120 1120 - Columns  
Item: 01125 1125 - Tie Beam  
Item: 01130 1130 - Part./Final Firestoppin  
Item: 01133 1133 - Truss Bracing  
Item: 01135 1135 - FRAMING WALLS  
Item: 01137 1137 - Accessibility Rough  
Item: 01140 1140 - Insulation  
Item: 01145 1145 - Roof Tin & Mop  
Item: 01150 1150 - Mop-On  
06/06/2000 By: STAN Action: CO Comments: NEED  
TO REVISE PERMIT UPLIFT - MOISTURE TEST PA FOR  
RECOVER

Item: 01155 1155 - Mortar Set Tile  
Item: 01160 1160- Roof Final  
Item: 01165 1165 - N Wall  
Item: 01170 1170 - Store Front  
Item: 01175 1175 - Interior  
Item: 01180 1180 - Drywall  
Item: 01185 1185 - Part Window & Glass DR  
Item: 01187 1187 - Final Windows & Doors  
Item: 01190 1190 - Other Bldg Inspection  
Item: 01193 1193 - Bldg Accessibility Fina  
Item: 01195 1195 - Part/Floor Final Inspec  
Item: 01199 1199 - Building Final  
Item: 03020 3020 Fire Smoke Barrier Doors  
Item: 03023 3023- Fire: Entrance Doors  
Item: 03090 3090- Fire: Other Inspection  
Item: 03099 3099 Fire Final

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

J QUINTERO ROOFING (CAP)  
CHAVEZ R  
601 S.W. 21 RD  
MIAMI, FL 33129

BVO4001199

2. Article Number

(Transfer from service label)

7002 2030 0000 9867 2419

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *R. Chavez*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

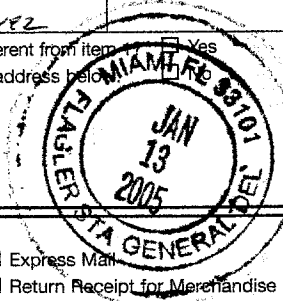
*Ricardo Chavez*

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below

☐ Yes



3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

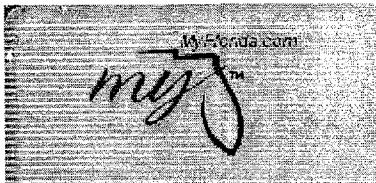
☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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10:11:03 AM 1/7/2005

**Public Services**

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[Change My Address](#)  
[View Messages](#)  
[Change My PIN](#)  
[View Continuing Ed](#)

[Term Glossary](#) [Online Help](#)**Licensee Details****Licensee Information**

Name: **CHAVEZ, RICARDO (Primary Name)**  
(DBA Name)  
Main Address: **601 SW 21 ROAD**  
**MIAMI Florida 33129**  
County: **DADE**

License Mailing:

License Location: **6925 NW 42ND STREET**  
**UNIT A**  
**MIAMI FL 33166**  
County: **DADE**

**License Information**

License Type: **Certified Roofing Contractor**  
Rank: **Cert Roofing**  
License Number: **CCCA46923**  
Status: **Current,Inactive**  
Licensure Date:  
Expires: **08/31/2006**

**Special Qualifications**  
**Bldg Code Core Course Credit**  
**Qualified Business License Required** **02/20/2004**  
**Qualification Effective**

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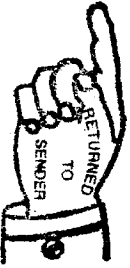


*City of Miami Beach*

BUILDING DEPARTMENT

P.O. BOX 0

MIAMI BEACH, FLORIDA 33139-1819



FORWARD ORDER EXPIRED

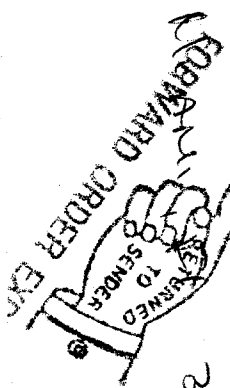
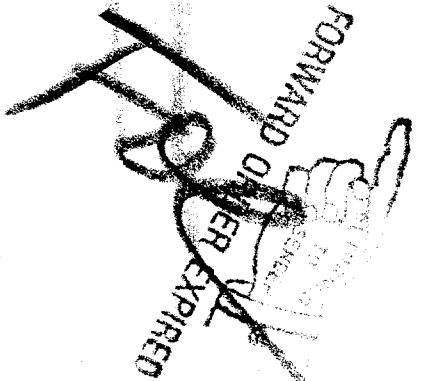
Mailed From 33109  
US POSTAGE

J. Quintero Roofing Corp.

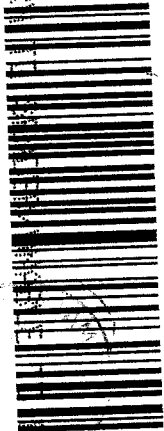
6925 NW 42nd St

Unit "A"

33166



RETURN



7002 2030 0000 9867 0873

J. Quintero Roofing Corp.

12386 SW 130 St

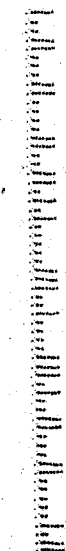
Miami, FL 33186

for

\$04.420

Mailed From 33109  
US POSTAGE

33139/1819

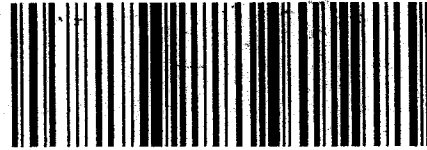


*City of Miami Beach*

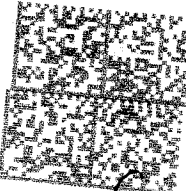
BUILDING DEPARTMENT  
P.O. BOX 0  
MIAMI BEACH, FLORIDA 33139-1819



RETURNED TO  
SENDER  
FORWARD ORDER EXPIRED



7004 1160 0006 3297 2853



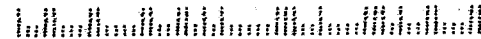
J Quintero Roofing Cor

6925 N.W 42nd St

Unit "A"

RETURNED TO  
SENDER  
FORWARD ORDER EXPIRED

33166



*City of Miami Beach*

BUILDING DEPARTMENT  
P.O. BOX 0  
MIAMI BEACH, FLORIDA 33139-1819



RETURNED TO  
SENDER  
FORWARD ORDER EXPIRED



RETURNED TO SENDER

7002 2030 0000 9867 0873

J. QUINTERO ROOFING CORP

12386 SW 130 ST

Miami, FL 33186

For

33139/1819  
33186



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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1. Article Addressed to:

J QUINTERO ROOFING CORP/  
CHAVEZ R.  
601 S.W. 21 RD.  
MIAMI, FL 33129

BVO4001199

2. Article Number

(Transfer from service label)

7002 2030 0000 9867 2419

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Ricardo Chavez*

☐ Agent

☐ Addressee

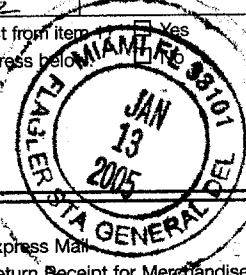
B. Received by (Printed Name)

*Ricardo Chavez*

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below



3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to:

CHAVEZ RICARDO  
601 S.W. 21 RD  
MIAMI, FL 33129

BVO4001199

2. Article Number

(Transfer from service label)

PS Form 3811, August 2001

Don

*City of Miami Beach*

BUILDING DEPARTMENT  
P.O. BOX 0  
MIAMI BEACH, FLORIDA 33139-1819



RETURN TO SENDER

7002 2030 0000 9867 2280

J Quintero Roofing Co  
12386 S.W. 130th St  
Miami - FL 33186

*UNC*

33139/1819

33139+6229

